DEPARTMENT OF PERSONNEL AND CIVIL SERVICE

SCHOHARIE, NEW YORK

APPLICATION for EXAMINATION or EMPLOYMENT

and

Civil Service Examination

INSTRUCTIONS

Filling out the civil service application form properly is *part of the examination* of your qualifications for civil service employment.

- 1. Before filling out the application, read the minimum qualifications for the position to see if you qualify. Minimum qualifications are stated on both the exam announcement and the job description.
- 2. The application is a government record and must be filled out in blue or black ink (or typed). It must also be legible.
- 3. Read each question carefully and answer it if you should. For example, No. 6 asks people who are not citizens to state whether they have the legal right to accept employment. Citizens are not asked to answer this question and should leave this question blank.
- 4. Be sure to state experience which relates to the minimum qualifications. You cannot he hired or tested unless you clearly show *how* you meet the minimum qualifications.
- 5. You may submit a résumé to the hiring agency as well as this application, *however* civil service does not consider résumés. A résumé alone is *not* acceptable for civil service appointment. You must also complete the application form.
- 6. Experience and prior employment which do not relate to the listed *minimum qualifications* are **not** considered in this part of the civil service exam. You only need to show experience which relates to minimum qualifications to get full credit in this part of the exam. However the hiring agency may wish to consider additional experience beyond that which meets the minimum qualifications.
- 7. If a license other than a common driver's license is required, attach a photo copy of the license. If you do not have a required license you may not be employed or tested.
- 8. Photo-copied signatures are NOT acceptable. The application must include an *original signature*. Your signature must be dated.
- 9. Notify this office if you change your name or address so that your civil service record can be kept accurate.

When Applying for Examination

- 1. A \$7.50 fee is charged for each examination; \$12.50 for each law enforcement examination. The fee is not refundable. Make check or money order payable to Department of Personnel. Do not send cash. Waivers are not accepted.
- 2. Notify this office immediately if you do not receive an admission or disqualification notice by one week before the exam.

This is not "just an application."

It is also an examination of how well you follow instructions.

Take your time and do a good job!

SCHOHARIE COUNTY 8. Check appropriate box to the right of each ques-DEPARTMENT OF PERSONNEL AND CIVIL SERVICE YES NO **Room 310 County Office Building** Were you ever dismissed or discharged from P.O. Box 675 Schoharie N.Y. 12157-0675 any employment for reasons other than lack of work or funds? [][] (518) 295-8374 B. Did you ever resign from any employment rather **APPLICATION for EXAMINATION** [][] than face dismissal? May Also Be Used to Apply for Employment Did you ever receive a discharge from the Exam Number: Position Armed Forces of the United States which was Title: other than honorable? [][] D. Have you ever been convicted of any crime. [][] (felony or misdemeanor)? 1. LAST NAME FIRST NAME INITIAL E. Are you now under charges for any crime? [][] F. Have you ever forfeited bail bond posted to MAILING ADDRESS guarantee your appearance in court to answer [][] any criminal charge? If you answered "Yes" to any of the questions A to F above, you may CITY STATE ZIP Code give specifics on a separate sheet. If you elect not to provide specifics or if such explanation is insufficient, you may be required to submit further information. Phone Number & Area Code None of the circumstances represents an automatic bar to employ-HOME: **BUSINESS:** ment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position for which you are applying. 2. SOCIAL SECURITY NUMBER: 9. Section 50-b of the New York State Civil Service Law requires that all applicants for examination be asked the following ques-3. Are you under 18 years of age? [] YES [] NO A. Have you any loans made or guaranteed by the New York If yes, enter your date of birth here: Month: Day: state Higher Education Services Corporation which are cur-If minimum and/or maximum age limits are established for the rently outstanding? Yes B. If so, are you presently in default on any such loan? position applied for, enter your date of birth here: Month: Dav: Yes ____No 4A. VETERANS' CREDITS. Do you wish to claim credit as a disabled or non-disabled war veteran? New York State human rights law prohibits discrimination in employment [] YES [] NO because of age, race, creed, color, national origin, sex, disability or marital status. nothing in this application should be viewed as expressing, If YES, please request veterans' credits form from our office. directly or indirectly, any limitation, specification, or discrimination as to 4B. EXEMPT VOLUNTEER FIREFIGHTER age, race, creed, color, national origin, sex, disability or marital status in] YES connection with employment by Schoharie County municipalities. 5. FOR EXAM PURPOSES ONLY. Do you require special arrangements, e.g. religious observances, handicapped accessibil-[] YES [] NO -- If YES, attach note with explanation. 6. NON-US CITIZENS ONLY. Do you have the legal right to THIS AFFIRMATION MUST BE COMPLETED accept employment in the United States? I affirm under penalties of perjury that all statements made on this appli-[] YES [] NO cation (including any attached papers) are true. I understand that all Non-citizens may be required to produce I-151 or I-361 Alien statements made in connection with this application are subject to inves-Registration Cards at time of appointment. tigation and verification and that a material misstatement or fraud may result in criminal prosecution and disqualify me from appointment and/or 7. State your present permanent legal residence and how long you have lead to revocation of my appointment. resided there continually, up to and including the date of this application. X FILL IN EACH LINE. Signature of Applicant Date NAME YRS. MO. School District Print any other last name by which you are or have been known. City or Village For Civil Service Use Town [] Paid Received County [] Approved [] Conditioned State [] Disapproved

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